

C L E L

LOCAL TELEPHONE COMPANY ANNUAL REPORT

OF THE

RECEIVED
4-17-23
ARK PUBLIC SERVICE COM
AUDIT SECTION

NAME TouchTone Communications, Inc.

(Here show in full the exact corporate, firm or individual name of the respondent)

LOCATED AT 3 Wing Drive, Suite 103, Cedar Knolls, NJ 07927

(Here give the location, including street and number of the respondent's main business office within the State)

COMPANY # 779

(Here give the APSC-assigned company number)

TO THE

ARKANSAS PUBLIC SERVICE COMMISSION



COVERING ALL OPERATIONS

FOR THE YEAR ENDING DECEMBER 31, 2022

LETTER OF TRANSMITTAL

To: Arkansas Public Service Commission
 Post Office Box 400
 Little Rock, Arkansas 72203-0400

Submitted herewith is the annual report covering the operation of TouchTone Communications, Inc.
 (Company)
 of ing Drive, Suite 103, Cedar Knolls, NJ 07 for the year ending December 31, 2022. This report is submitted in
 (Location)
 accordance with Section 51 of Act 324 of the 1935 Acts of Arkansas.
 The following report has been carefully examined by me, and I have executed the verification given below.

Damon Beasley
 (Signature)

Attorney In Fact
 (Title)

 VERIFICATION

STATE OF Georgia)
) ss.
 COUNTY OF Fulton)

I, the undersigned, Damon Beasley, Attorney In Fact of the
 (Name and Title)
TouchTone Communications, Inc., on my oath do say that the following report has
 (Company)

been prepared under my direction from the original books, papers, and records of said utility: that I have carefully examined the same, and declare the same a complete and correct statement of the business and affairs of said utility in respect to each and every matter and thing set forth, to the best of my knowledge, information, and belief; and I further say that no deductions were made before stating the gross revenues, and that accounts and figures contained in the foregoing statements embrace all of the financial transactions for the period in this report.

Damon Beasley
 (Signature)

Subscribed and sworn to before me this 6th
 day of Apr-23
 My Commission Expires 2/9/2027

[Signature]
 (Signature of Notary)



REPORT TO ARKANSAS PUBLIC SERVICE COMMISSION

Give the name, title, office address, telephone number and e-mail address of the person to whom any correspondence concerning this report should be addressed:

Name Damon Beasley Title Attorney In Fact

Address 3575 Piedmont Rd NE Bld 15 Ste. 1550; Atlanta, GA 30305

Telephone Number 404-835-6347

E-Mail damon.beasley@claconnect.com

Give the name, address, telephone number and e-mail address of the resident agent:

Name Cogency Global, Inc. Telephone Number 800-927-9800

Address 1215 Twin Lakes Drive, Little Rock, AR 72205

E-Mail _____

REPORT TO ARKANSAS PUBLIC SERVICE COMMISSION

IDENTITY OF RESPONDENT

1. Give the exact name by which respondent was known in law at the close of the year. Use the initial word "The" only when it is part of the name:

TouchTone Communications, Inc.

2. Give the location (including street and number) of (a) the main Arkansas business office of respondent at the close of the year, and (b) if respondent is a foreign corporation, the main business office if not in this state:

(a)

(b) 3 Wing Drive, Suite 103,
Cedar Knolls, NJ 07927

3. Indicate by an **x** in the proper space (a) the type of service rendered, and (b) the type of organization under which respondent was operating at the end of the year.

(a) () Electric, () Gas, () Water, (X) Telephone, () Other

(b) () Proprietorship, () Partnership, () Joint Stock Association,
() Corporation, () Other (describe below):

4. If respondent is not a corporation, give (a) date of organization, and (b) name of the proprietor or the names of all partners, and the extent of their respective interest at the close of the year.

(a)

(b)

5. If a corporation, indicate (a) in which state respondent is incorporated, (b) date of incorporation, and (c) designation of the general law under which respondent was incorporated, or, if under special charter, the date of passage of the act:

(a) Delaware

(b) 1/30/2002

(c) General Corporation Law

6. State whether or not respondent during the year conducted any part of its business within the State of Arkansas under a name or names other than that shown in response to inquiry No. 1 above, and, if so, give full particulars:

REPORT TO ARKANSAS PUBLIC SERVICE COMMISSION

7. State whether respondent is a consolidated or merged company. If so, (a) give date and authority for each consolidation or merger, (b) name all constituent and merged companies, and (c) give like particulars as required of the respondent in inquiry No. 5 above:

(a)

(b)

(c)

8. State whether respondent is a reorganized company. If so, give (a) name of original corporation, (b) date of reorganization, (c) reference to the laws under which it was reorganized and (d) state the occasion of the reorganization, whether because of foreclosure of mortgage or otherwise, giving full particulars.

(a)

(b)

(c)

(d)

9. Was respondent subject to a receivership or other trust at any time during the year? No
If so, state:

(a) Name of receiver or trustee: _____

(b) Name of beneficiary or beneficiaries for whom trust was maintained:

(c) Purpose of the trust: _____

(d) Give (1) date of creation of receivership or other trust, and (2) date of acquisition of respondent: (1) _____ (2) _____

10. Did the respondent act in any of the capacities listed in Paragraph (a) below during the past year? No _____ If so,

(a) Indicate the applicable one by an **X** in the proper space:

() Guarantor, () Surety, () Principal--obligor to a surety contract,
() Principal--obligor to a guaranty contract.

(b) Insert a statement showing the character, extent, and terms of the primary agreement or obligation, including (1) names of all parties involved, (2) extent of liability of respondent, whether contingent or actual, (3) extent of liabilities of the other parties, whether contingent or actual, and (4) security taken or offered by respondent.

REPORT TO ARKANSAS PUBLIC SERVICE COMMISSION

DIRECTORS

Give the name and office addresses of all directors at the close of the year, and dates of beginning and expiration of terms. Chairman (*) and Secretary (**) marked by asterisks.

Name of Director	Office Address	Date of Term	
		Beginning	End
Pino Bio	3 Wing Drive, Suite 103, Cedar Knolls, NJ 07927	Perpetual	
Greg Glodek	3 Wing Drive, Suite 103, Cedar Knolls, NJ 07927	Perpetual	

PRINCIPAL OFFICERS AND KEY MANAGEMENT PERSONNEL

Give the title of the principal officers, managers and key personnel, the names and office addresses of persons holding such positions at the close of the year.

Title	Name of person holding office at close of year	Office Address
President	Pino Bio	3 Wing Drive, Suite 103, Cedar Knolls, NJ 07927
CFO	Greg Glodek	3 Wing Drive, Suite 103, Cedar Knolls, NJ 07927

GROSS ASSESSABLE REVENUES

Description	Amount
ARKANSAS GROSS ASSESSABLE REVENUES (excluding Interstate Tolls)	\$27,778

LOCAL EXCHANGE SERVICE STATISTICS

ACCESS LINES	ARKANSAS
Residence Business	6
TOTAL RESIDENTIAL & BUSINESS ACCESS LINES	6
PBX Access Lines Coin or Credit Card Paystation Access Lines Company Official Access Lines (Numbers)	
TOTAL ACCESS LINES	6

STATEMENT OF ACCURACY

I do hereby state that the amounts contained in this report are true and accurate, schedules have been cross-referenced by use of the attached check list, and that the accuracy of all totals has been verified by me or under my supervision. Should I or anyone under my supervision become aware of any error in or omission from this report, I will take steps to notify the Arkansas Public Service Commission of such error or omission and provide corrected schedules as soon as possible.



Attorney In Fact

REPORT TO ARKANSAS PUBLIC SERVICE COMMISSION

COMPANY CONTACTS

Company Information	
Company Name	TouchTone Communications, Inc.
dba	
Official Mailing Address	3 Wing Drive, Suite 103, Cedar Knolls, NJ 07927
Mailing Address for APSC Annual Assessment Invoice	3575 Piedmont Rd. NE, Bld. 15 Suite 1550; Atlanta, GA 30305

AREA	PERSON TO CONTACT	PHONE #	FAX #	E-MAIL
Annual Report	Damon Beasley	404-835-6347	678-487-8808	damon.beasley@claconnect.com
APSC Annual Assessment	Daniel Velez	973-352-6076	973-352-6076	regulatory@touchtone.net
Tariffs	Daniel Velez	973-352-6076	973-352-6076	regulatory@touchtone.net
Property Taxes	Daniel Velez	973-352-6076	973-352-6076	regulatory@touchtone.net
Regulatory Affairs	Daniel Velez	973-352-6076	973-352-6076	regulatory@touchtone.net

Please list the number of utility employees located in Arkansas

None